

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) INFORMED CITIZENS		FEC IDENTIFICATION NUMBER ▼ C C00622951	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Ghost Communications		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 5512 Highwood Dr		Amount 1250.00	
City Edina	State MN	Zip Code 55436	Transaction ID : SE.5491
Purpose of Expenditure Public Relations		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 07 / 2016
Name of Federal Candidate DONALD J. TRUMP FOR PRESIDENT, INC., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		10591.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Graham Immerman		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 55 Indian Hill		Amount 1000.00	
City Florence	State MA	Zip Code 01062	Transaction ID : SE.5492
Purpose of Expenditure Media consultation		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016
Name of Federal Candidate DONALD J. TRUMP FOR PRESIDENT, INC., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		9341.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2250.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Merck, Wilhelm, , ,

[Electronically Filed]

Date

MM / DD / YYYY
11 / 04 / 2016

Signature

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Graham Immerman		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 55 Indian Hill		Amount 1000.00	
City Florence	State MA	Zip Code 01062	Transaction ID : SE.5495
Purpose of Expenditure Media consultation		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2016
Name of Federal Candidate DONALD J. TRUMP FOR PRESIDENT, INC., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		11591.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Hackett Creative		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 232 Argilla Rd		Amount 8341.50	
City Ipswich	State MA	Zip Code 01938	Transaction ID : SE.5493
Purpose of Expenditure Video production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016
Name of Federal Candidate DONALD J. TRUMP FOR PRESIDENT, INC., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		8341.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	9341.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Merck, Wilhelm, , ,

Signature

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Full Name of Payee Pessolano, Angela, , ,		Date of Public Distribution/Dissemination 10 / 31 / 2016	
Mailing Address 141 Louis Rd		Amount 1000.00	
City Springfield	State MA	Zip Code 01118	Transaction ID : SE.5494
Purpose of Expenditure Public Relations	Category/Type 004	Date of Disbursement or Obligation 10 / 17 / 2016	
Name of Federal Candidate DONALD J. TRUMP FOR PRESIDENT, INC., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought 12591.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure	Category/Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought:		District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....▶	12591.50

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*Merck, Wilhelm, , ,**[Electronically Filed]*

Date

11 / 04 / 2016

Signature